

09-12-03

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)  
 000826 7590 08/26/2003

ALSTON & BIRD LLP  
 BANK OF AMERICA PLAZA  
 101 SOUTH TRYON STREET, SUITE 4000  
 CHARLOTTE, NC 28280-4000



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## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Tracey S. Wright

(Depositor's name)

*Tracey S. Wright*

(Signature)

September 9, 2003

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/656,563	09/07/2000	Anders Leandersson	9285-8	2016

TITLE OF INVENTION: PAPERMAKING DEVICE FOR PRODUCING A MULTILAYER LINER AND ASSOCIATED METHODS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300	\$0	\$1300	11/26/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
FORTUNA, JOSE A	1731	162-123000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Alston & Bird LLP

2 \_\_\_\_\_

3 \_\_\_\_\_

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Metso Paper Karlstad AB

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Karlstad, Sweden

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

## 4a. The following fee(s) are enclosed:

☒ Issue Fee (\$1300)

☐ Publication Fee

☐ Advance Order - # of Copies \_\_\_\_\_

## 4b. Payment of Fee(s):

☒ A check in the amount of the fee(s) is enclosed.

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(deficiencies only)

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

Kevin R. Lyn

9/10/03

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